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CONFIRMATION NO. 5248

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| SERIAL NUMBER 09/576,951 | FILING OR 371(c) DATE 05/24/2000 RULE | CLASS 436 | GROUP ART UNIT 1641 | ATTORNEY DOCKET NO. A-7733 | |
| APPLICANTS Katherine L. Molnar-Kimber, Worcester, PA; Craig E. Caufield, New York, NY; Timothy D. Ocain, Framingham, MA; | | | | | |
| ** CONTINUING DATA ***** This application is a CIP of 08/424,983 04/19/1995 ABN which is a CON of 08/224,205 04/14/1994 ABN which is a CIP of 08/053,030 04/23/1993 ABN <i>YES, SH</i> | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>NONE, SH</i> | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/03/2000 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Signature RP</i> <i>SH</i> Examiner's Signature Initials | | STATE OR COUNTRY PA | SHEETS DRAWING | TOTAL CLAIMS 8 | INDEPENDENT CLAIMS 2 |
| ADDRESS Sughrue Mion Zinn Macpeak & Seas PLLC 2100 Pennsylvania Avenue NW Washington, DC20037-3213 | | | | | |
| TITLE Anti-rapamycin monoclonal antibodies | | | | | |
| FILING FEE RECEIVED 1496 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |